

<b>Index of Claims</b>		Application/Control No.	Applicant(s)/Patent Under Reexamination
		10540708	
		Examiner	Art Unit
Rainey, Robert R		2629	

<input checked="" type="checkbox"/>	<b>Rejected</b>	<input type="checkbox"/>	<b>Cancelled</b>	<input type="checkbox"/>	<b>Non-Elected</b>	<input type="checkbox"/>	<b>Appeal</b>
=	<b>Allowed</b>	÷	<b>Restricted</b>	I	<b>Interference</b>	O	<b>Objected</b>

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA	<input type="checkbox"/> T.D.	<input type="checkbox"/> R.1.47
<b>CLAIM</b>				<b>DATE</b>
Final	Original	11/29/2007		
	1	✓		
	2	✓		
	3	✓		
	4	✓		
	5	✓		
	6	✓		
	7	✓		
	8	✓		
	9	✓		
	10	✓		
	11	✓		